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Campaign Finance Section Financial Reports

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

Full Organization Name: AgentPAC of DE

Account Number: 480

Date of this Report: 01/16/2009

REPORTING PERIOD: FROM: 10/28/2008 TO: 12/31/2008

Check the box that applies to this report:

Primary Election	<input type="checkbox"/> 8-DAY	<input type="checkbox"/> 30-DAY
General Election	<input type="checkbox"/> 8-DAY	<input type="checkbox"/> 30-DAY
Other Election	<input type="checkbox"/> 8-DAY	<input type="checkbox"/> 30-DAY
Special Election	<input type="checkbox"/> 8-DAY	<input type="checkbox"/> 30-DAY

Office: _____

Year End Report ☒ Final Organization Closing ☐

Closing Date: _____

I authorize that all information included in this Financial Report package is accurate and correct. I agree to abide by all rules and regulations regarding Campaign Finance and the election process in the State of Delaware. I understand that representatives from the Office of the State Election Commissioner will perform an audit of all information provided on this report.


TREASURER SIGNATURE

1/21/09
DATE

CANDIDATE SIGNATURE

DATE



STATEMENT OF ACCOUNT BALANCE

ACCOUNT #: 480		REPORTING PERIOD: 10/28/2008 12/31/2008	
		FROM	TO
1. BEGINNING BALANCE			\$2,055.86
(Close Out Balance from last reporting period)			
2. RECEIPTS:			
A. SCHEDULE A - TOTAL RECEIPTS			\$0.00
B. SCHEDULE C-1 - TOTAL IN-KIND CONTRIBUTIONS			\$0.00
C. SCHEDULE D-1 - TOTAL LOANS RECEIVED			\$0.00
D. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS RECEIVED			\$0.00
E. SUBTOTAL (Total of A, B, C, D)			\$0.00
3. EXPENDITURES:			
F. SCHEDULE B - TOTAL EXPENDITURES			(\$200.00)
G. SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES			\$0.00
H. SCHEDULE D-2 - TOTAL LOAN PAYMENTS			\$0.00
I. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS PAID			\$0.00
J. SUBTOTAL (Total of F, G, H, I)			(\$200.00)
4. ENDING BALANCE			\$2,255.86
(Beginning Balance plus 2E, minus 3J)			
5. VALUE OF NON-CASH ASSETS (From Schedule F)			\$0.00
6. VALUE OF DISPOSED/TRANSFERRED ASSETS (From Schedule G)			\$0.00
7. VALUE OF LOANS AT END OF PERIOD (Loan Balance from Schedule D-2)			\$0.00
8. CLOSE OUT BALANCE (Must equal zero if Committee closed)			\$2,255.86



SCHEDULE B - TOTAL EXPENDITURES

ACCT #: 480

REPORTING PERIOD:

10/28/2008

12/31/2008

FROM

TO

Itemize all expenditures over \$100 for the reporting period. All expenditures to Political Committees must be itemized, regardless of the amount. NOTE: IF you expend funds to the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

EXPENDITURES IN EXCESS OF \$100:

Date Expended	Payee Name	Payee Mailing Address	Reason Code	Aggregate Amount	Amount Expended
12/23/2008	People for McDowell Void - People for McDowell Senator Harris McDowell III STATE SENATE001	801 West 20th Street Wilmington, DE 19802-3814	17	\$0.00	(\$100.00)
12/23/2008	Friends of Greg Hastings Void - Friends of Greg Hastings DE Rep. Gregory Hastings STATE HOUSE041	4 Mill Landing Millsboro, DE 19966	17	\$0.00	(\$100.00)
TOTAL EXPENDITURES IN EXCESS OF \$100					(\$200.00)
TOTAL EXPENDITURES NOT IN EXCESS OF \$100					\$0.00
GRAND TOTAL EXPENDITURES					(\$200.00)
(THIS TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3F)					



SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS

ACCT #: 480

REPORTING PERIOD:

10/28/2008

12/31/2008

FROM

TO

Itemize all goods and services contributed at no charge or less than fair market value in excess of \$100 for the reporting period.
NOTE: If you receive in-kind contributions from the same person or organization several times during the reporting period, each item must be listed if the aggregate amount is over \$100, even if the individual amounts are not.

IN-KIND CONTRIBUTIONS IN EXCESS OF \$100:

(NOTE: ESTIMATED VALUE RECEIVED IS FAIR MARKET VALUE LESS ANY PAYMENTS YOU MADE FOR THE GOODS OR SERVICES)

Date Received	Contributor Name	Contributor Mailing Address	Description of Contribution	Estimated Value Received
TOTAL IN-KIND CONTRIBUTIONS IN EXCESS OF \$100				\$0.00
TOTAL IN-KIND CONTRIBUTIONS NOT IN EXCESS OF \$100				\$0.00
GRAND TOTAL IN-KIND RECEIPTS				\$0.00
(THIS TOTAL SHOULD ALSO APPEAR ON PAGE 2, A21 STATEMENT OF ACCOUNT BALANCE, ITEM 2B)				



SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES

ACCT #: 480

REPORTING PERIOD:

10/28/2008

12/31/2008

FROM

TO

Itemize all goods and services expended at no charge or less than fair market value in excess of \$100 for the reporting period.
 NOTE: If you pay in-kind expenditures to the same person or organization several times during the reporting period, each item must be listed if the aggregate amount is over \$100, even if the individual amounts are not.

IN-KIND EXPENDITURES IN EXCESS OF \$100:

(NOTE: ESTIMATED VALUE EXPENDED IS FAIR MARKET VALUE LESS ANY PAYMENTS YOU RECEIVED FOR THE GOODS OR SERVICES)

Date Expended	Payee Name	Payee Mailing Address	Description of Expenditure	Estimated Value Expended
TOTAL IN-KIND EXPENDITURES IN EXCESS OF \$100				\$0.00
TOTAL IN-KIND EXPENDITURES NOT IN EXCESS OF \$100				\$0.00
GRAND TOTAL IN-KIND EXPENDITURES				\$0.00
<small>(THIS TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3G)</small>				